CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

O The period covered is ..

☐ Candidate

the date of leaving office.

Election Year:

RECEISTATEMENT OF ECONOMIC INTERESTS

(MIDDLE)

Please type or print in ink.

(LAST)

NAME

10 MAR - 1 PM 4: 11 A Public Document

(FIRST)



Fong	Paul	J.		
MAILING ADDRESS STREET (Business Address Acceptable)	CITY	STATE	ZIP CODE	OPTIONAL ENAME ADDRESS
(Business Acceptage)				
the contract of the contract o	Same to the second seco			
1. Office, Agency, or Cou	rt	4. Schedule	Summar	<u></u>
Name of Office, Agency, or Court:	***************************************	► Total numbe		
California State Legislature		including thi	s cover page	·
Division, Board, District, if applicat	ole:	► Check applic interests,"	able s c hedul	es or "No reportable
Your Position:		I have disclos attached sche	- -	on one or more of the
Assemblymember If filing for multiple positions, lis position(s): (Attach a separate		Schedule A-1	X Yes - 5	chedule attached ership)
Agency:			Yes – Si 0% or Greater Own	chedule attached ership)
Position:		Schedule B Real Property	🔀 Yes - s	chedule attached
2. Jurisdiction of Office	Check at least one box)	Schedule C Income, Loans, and Travel Payme	, & Business Po	chedule attached ositions (Income Other Ihan Gifts
▼ State	1	Schedule D	X Yes - s	chedule attached
County of		Income - Gifts	· 	
City of		Schedule E	☐ Yes - s	chedule attached
Multi-County		Income – Gifts	- Travel Paym	ents
Other	VVVVVIII		-or-	•
2 Tune of Statement (a)		☐ No reporta	able interests	on any schedule
3. Type of Statement (ch				***************************************
Assuming Office/Initial Da	ate:/	5. Verification	> n	
Annual: The period covered is through December 31, 2009.	s January 1, 2009,			diligence in preparing this this statement and to the best
O The period covered is December 31, 2009.	<i>JJ</i> , through	1	e the informati	on contained herein and in any
Leaving Office Date Left:(Check one)				ury under the laws of the State ring is true and correct.
O The period covered is Janu date of leaving office.	ary 1, 2009, through the	Date Signed _	2/23	/10
-or-				UDY YOUT

_, through

Signature

PPC Form 700 (2009/2010) FPPC Toll-Free Helpline: 866/ASK-FPPC www.fppc.ca.gov

vith your filing official.)

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM	
Name	······································
Paul Fong	

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
The Flower Cottage	P.F. Properties
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Retail Florist	Real Estate Brokerage
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 X \$10,001 - \$100,000	⊠ \$2,000 - \$10,000
\$1,000,000Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT Stock Other
(Describe)	(Describe)
Partnership Income of \$0 - \$500 Income Received of \$500 or More (Report on Schedule C)	Partnership Income of \$0 - \$500 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/ / 09 / / 09	/ / 09 / / 09
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	➤ NAME OF BUSINESS ENTITY
	Fr. 11.
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,000 \$10,000	\$2,000 - \$10,000 \ \ \$10,000
\$100,001 \\$1,000,000 \Qver \$1,000,000	\$100,001 - \$1,000,000
	, manada
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT Stock Other
(Describe)	(Describe)
Parmership Income of \$0 - \$500 Income Received of \$500 or More (Report on Schedule C)	Partnership Income of \$0 - \$500
,	
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/ / 09 // / 09	
acquired disposed	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 · \$10,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
,	
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT Stock Other
(Describe)	(Describe)
Partnership O Income of \$0 - \$500 O Income Received of \$500 or More (Report on Schedule C)	Partnership Income of \$0 - \$500 Income Received of \$500 or More (Heport on Schedule C)
O LINGUISTING OF BOOK OF BROOK OF SELECTION SELECTIONS OF	
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACOURED DISPOSED
Comments:	10:192

SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

CALIFORNIA FORM 70 FAIR POLITICAL PRACTICES COMMISSI	0
Name	
Paul Fong	

► 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
The Flower Cottage	P.F. Properties
Name 465 N. Wolfe Road, Sunnyvale, CA 94085	Name 465 N. Wolfe Road, Sunnyvale, CA 94085
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one Trust, go to 2 Business Entity, complete the box, then go to 2	Check one Trusi, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE IF APPLICABLE, LIST DATE; □ \$2,000 - \$10,000 □ \$100,001 - \$100,000 □ \$100,001 - \$1,000,000 □ ACQUIRED □ Over \$1,000,000 □ Over \$1,000,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$100,001 - \$1,000,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Sole Proprietorship Partnership Other	NATURE OF INVESTMENT Sole Proprietorship Partnership Other
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME 10 THE ENTITY/TRUST)	➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
S10,001 - \$100,000	\$10,001 - \$100,000
\$500 - \$1,000 X OVER \$100,000	\$500 - \$1,000 OVER \$100,000
➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (attach a separate sheet if necessary)	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (attach a separate sheet if necessary)
► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD <u>BY</u> THE BUSINESS ENTITY OR TRUST	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST
Check one box: INVESTMENT REAL PROPERTY	Check one box: INVESTMENT REAL PROPERTY
INVESTMENT KEAL PROJEKTI	
Name of Business Entity or Street Address or Assessor's Parcel Number of Real Property	Name of Business Entity or Street Address or Assessor's Parcel Number of Real Property
Description of Business Activity or City or Other Precise Location of Real Property	Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000	\$100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
Leasehold Yrs. remaining Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2009/2010) Sch. A-2

SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM FAIR POLITICAL PRACTICES CO	
Name	
Paul Fong	

STREET ADDRESS OR PRECISE LOCATION	► STREET ADDRESS OR PRECISE LOCATION
420 E. Evelyn #202	
CITY	CITY
Sunnyvale, CA 94086	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$10,001 - \$100,000///	\$10,001 - \$100,000///
\$100,001 - \$1,000,000 ACQUIRED DISPOSED	\$100,001 - \$1,000,000 ACQUIRED DISPOSED
Over \$1,000,000	Qver \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Ownership/Deed of Trust Easement	Ownership/Deed of Trusl Easement
Leasehold	Leasehold
Yrs, remaining Other	Yrs. remaining Other
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000	\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000
\$10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000 OVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
	<u> </u>
	lending institutions made in the lender's regular course blic without regard to your official status. Personal loans f business must be disclosed as follows:
of business on terms available to members of the pul	blic without regard to your official status. Personal loans
of business on terms available to members of the put and loans received not in a lender's regular course of	blic without regard to your official status. Personal loans f business must be disclosed as follows:
of business on terms available to members of the put and loans received not in a lender's regular course of NAME OF LENDER*	blic without regard to your official status. Personal loans f business must be disclosed as follows:
of business on terms available to members of the put and loans received not in a lender's regular course of NAME OF LENDER* Washington Mutual	olic without regard to your official status. Personal loans f business must be disclosed as follows: NAME OF LENDER*
of business on terms available to members of the put and loans received not in a lender's regular course of NAME OF LENDER* Washington Mutual ADDRESS (Business Address Acceptable)	olic without regard to your official status. Personal loans f business must be disclosed as follows: NAME OF LENDER*
of business on terms available to members of the put and loans received not in a lender's regular course of NAME OF LENDER* Washington Mutual ADDRESS (Business Address Acceptable) Sunnyvale Branch BUSINESS ACTIVITY, IF ANY, OF LENDER	blic without regard to your official status. Personal loans f business must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER
of business on terms available to members of the put and loans received not in a lender's regular course of NAME OF LENDER* Washington Mutual ADDRESS (Business Address Acceptable) Sunnyvale Branch BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)	olic without regard to your official status. Personal loans f business must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable)
of business on terms available to members of the put and loans received not in a lender's regular course of NAME OF LENDER* Washington Mutual ADDRESS (Business Address Acceptable) Sunnyvale Branch BUSINESS ACTIVITY, IF ANY, OF LENDER	blic without regard to your official status. Personal loans f business must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER
of business on terms available to members of the put and loans received not in a lender's regular course of NAME OF LENDER* Washington Mutual ADDRESS (Business Address Acceptable) Sunnyvale Branch BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) 5.5 None 360 months	blic without regard to your official status. Personal loans f business must be disclosed as follows: NAME OF LENDER** ADDRESS (Business Address Acceptable)
of business on terms available to members of the put and loans received not in a lender's regular course of NAME OF LENDER* Washington Mutual ADDRESS (Business Address Acceptable) Sunnyvale Branch BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) 5.5 None HIGHEST BALANCE DURING REPORTING PERIOD	blic without regard to your official status. Personal loans f business must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable)
of business on terms available to members of the put and loans received not in a lender's regular course of NAME OF LENDER* Washington Mutual ADDRESS (Business Address Acceptable) Sunnyvale Branch Business ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) 5.5 96 None 360 months HIGHEST BALANCE DURING REPORTING PERIOD \$550 - \$1,000 \$1,001 - \$10,000	blic without regard to your official status. Personal loans follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Monibs/years)
of business on terms available to members of the put and loans received not in a lender's regular course of NAME OF LENDER* Washington Mutual ADDRESS (Business Address Acceptable) Sunnyvale Branch BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) 5.5 None HIGHEST BALANCE DURING REPORTING PERIOD	blic without regard to your official status. Personal loans f business must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable)
of business on terms available to members of the put and loans received not in a lender's regular course of NAME OF LENDER* Washington Mutual ADDRESS (Business Address Acceptable) Sunnyvale Branch Business ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) 5.5 96 None 360 months HIGHEST BALANCE DURING REPORTING PERIOD \$550 - \$1,000 \$1,001 - \$10,000	blic without regard to your official status. Personal loans foliows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Monibs/Years)

SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION	
Name	
Paul Fong	

The Flower Cottage ADDRESS (Business Address Acceptable) 465 No Wolfe Road, Sunnyvale, CA 94085 BUSINESS ACTIVITY, IF ANY, OF SOURCE Retail Florist YOUR BUSINESS POSITION Sole Proprietor - owner GROSS INCOME RECEIVED \$500 - \$1,000 \$1,001 - \$10,000 \$3,0001 - \$10,000 \$1,001 - \$10,000 \$10,001 - \$100,000 \$3,0001 - \$	1. INCOME RECEIVED	► 1. INCOME RECEIVED
ACDRESS (Business Address Acceptable) 465 No Wolfe Road, Sunnyvale, CA 94085 BUSINESS ACTIVITY, IF ANY, OF SOURCE Retail Florist YOUR BUSINESS POSITION Sole Proprietor - Owner GROSS INCOME RECEIVED \$500 - \$1.000 \$1.001 - \$10.000 \$10.001 - \$10.000 \$1.001 - \$10.000 \$10.001 - \$100,000 \$0 OVER \$100,000 CONSIDERATION FOR WHICH INCOME WAS RECEIVED \$4800 - \$1.0001 - \$100,000 \$2 OVER \$100,000 CONSIDERATION FOR WHICH INCOME WAS RECEIVED \$4800 - \$1.0001 - \$100,000 \$2 OVER \$100,000 CONSIDERATION FOR WHICH INCOME WAS RECEIVED \$4800 - \$1.0001 - \$100,000 \$1,001 - \$10,000 \$500 - \$1.0001 - \$100,000 \$2 OVER \$100,000 \$500 - \$1.0001 - \$100,000 \$2 OVER \$100,000 \$500 - \$1.0001 - \$100,000 \$2 OVER \$100,000 \$500 - \$1.0001 - \$10,000 \$2 OVER \$100,000 \$10,001 - \$100,000 \$2 OVER \$100,000 \$10,001 - \$100,000 \$1,001 - \$10,000 \$10,001 - \$100,000 \$1,001 - \$10,000 \$10,001 - \$100,000 \$1,001 - \$10,000 \$10,001 - \$100,000 \$1,001 - \$10,000 \$10,001 - \$100,000 \$1,001 - \$10,000 \$10,001 - \$100,000 \$1,001 - \$10,000 \$10,001 - \$100,000 \$1,001 - \$10,000 \$10,001 - \$100,000 \$1,001 - \$10,000 \$10,001 - \$100,000 \$	NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
465 No Wolfe Road, Sunnyvale, CA 94085 BUSINESS ACTIVITY, IF ANY, OF SOURCE Retail Florist VOUR BUSINESS POSITION Sole Proprietor - owner GROSS INCOME RECEIVED \$500 - \$1,000 - \$10,000 \$1,001 - \$10,000 \$10,001 - \$10,000 \$1,001 - \$10,000 \$10,001 - \$10,000 \$1,001 - \$10,000 \$10,001 - \$10,000 \$0 \$1,001 - \$10,000 \$10,001 - \$10,000 \$0 \$1,001 - \$10,000 \$10,001 - \$10,000 \$0 \$1,001 - \$10,000 \$10,001 - \$10,000 \$0 \$0 \$1,001 - \$10,000 \$10,001 - \$10,000 \$0 \$1,001 - \$10,000 \$10,001 - \$10,000 \$0 \$1,001 - \$10,000 \$10,001 - \$10,000 \$0 \$1,001 - \$10,000 \$10,001 - \$10,000 \$0 \$0 \$0 \$1,001 - \$10,000 \$10,001 - \$10,000 \$0 \$0 \$0 \$0 \$0 \$0 \$0		· · · · · · · · · · · · · · · · · · ·
BUSINESS ACTIVITY, IF ANY, OF SOURCE Retail Florist VOUR BUSINESS POSITION Sole Proprietor - owner GROSS INCOME RECEIVED \$500 - \$1,000	· · · · · · · · · · · · · · · · · · ·	· ·
Retail Florist VOUR BUSINESS POSITION Sole Proprietor - owner GROSS INCOME RECEIVED \$500 - \$1,000		
VOUR BUSINESS POSITION Sole Proprietor - owner GROSS INCOME RECEIVED \$500 - \$1,000		
Sole Proprietor - owner GROSS INCOME RECEIVED \$500 - \$1,000		
GROSS INCOME RECEIVED \$1500 - \$1,000 \$1,001 - \$10,000 \$1,001 - \$10,000 \$1,001 - \$10,000 \$1,001 - \$10,000 \$1,001 - \$100,000 \$1,001 - \$100,000 \$1,001 - \$100,000 \$1,001 - \$100,000 \$1,001 - \$100,000 \$1,001 - \$100,000 \$1,001 - \$100,000 \$1,001 - \$100,000 \$1,001 - \$100,000 \$1,001 - \$100,000 \$1,001 - \$100,000 \$1,001 - \$100,000 \$1,001 - \$100,000 \$1,001 - \$100,000 \$1,001 - \$100,000 \$1,001 - \$100,000 \$1,001 - \$100,000 \$1,001 - \$1,001 - \$1,001 - \$1,001 - \$1,001 - \$1,0000 \$1,001 - \$1,0000 \$1,001 - \$1,0000 \$1,001 - \$1,0000 \$1,001 - \$1,0000 \$1,001 - \$1,0000 \$1,001 - \$1,0000 \$1,001 - \$1,0000 \$1,001 - \$1,0000 \$		TOUR BUSINESS PUSITION
\$500 - \$1,000	Sole Proprietor - owner	
S10,001 - \$100,000 OVER \$1	_	
CONSIDERATION FOR WHICH INCOME WAS RECEIVED Salary Spouse's or registered domestic partner's income Salary Spouse's or registered domestic partner's income Loan repayment Loan repayment Loan repayment Sale of (Property, car, boat, etc.) Commission or Rental Income, itsi each source of \$10,000 or more Other (Describe) You are not required to report loans from commercial lending institutions, or any indebtedness created a of a retail installment or credit card transaction, made in the lender's regular course of business on term available to members of the public without regard to your official status. Personal loans and loans recent in a lender's regular course of business must be disclosed as follows: NAME OF LENDER* INTEREST RATE TERM (Moniths'Years) ADDRESS (Business Address Acceptable) SECURITY FOR LOAN None Personal residence Real Property Sireet address Si		1
Salary Spouse's or registered domestic partner's income Loan repayment Loan repayme	210,001 - 2100,000 X 045K 2100,000	\(\begin{array}{cccccccccccccccccccccccccccccccccccc
Loan repayment Loan repayment Sale of (Property, car, boat, etc.) Sale of (Property, car, boat, etc.)	CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Sale of	Salary Spouse's or registered domestic partner's income	Salary Spouse's or registered domestic partner's income
Commission or Renial Income, its each source of \$10,000 or more Commission or Renial Income, its each source of \$10,000 or more Commission or Renial Income, its each source of \$10,000 or more Commission or Renial Income, its each source of \$10,000 or more Commission or Renial Income, its each source of \$10,000 or more Commission or Renial Income, its each source of \$10,000 or more Commission or Renial Income, its each source of \$10,000 or more Commission or Renial Income, its each source of \$10,000 or more Commission or Renial Income, its each source of \$10,000 or more Commission or Renial Income, its each source of \$10,000 or more Commission or Renial Income, its each source of \$10,000 or more Commission or Renial Income, its each source of \$10,000 or more Commission or Renial Income, its each source of \$10,000 or more Commission or Renial Income, its each source of \$10,000 or Commission or Renial Income, its each source of \$10,000 or Commission or Renial Income, its each source of \$10,000 or Commission or Renial Income, its each source of \$10,000 or Commission or Renial Income, its each source of \$10,000 or Commission or Renial Income, its each source of \$10,000 or Commission or Renial Income, its each source of \$10,000 or Commission or Renial Income, its each source of \$10,000 or Commission or Commission or Renial Income, its each source of \$10,000 or Commission or C	Loan repayment	Loan repayment
Commission or	Sale of	Sale of
Other	(Property, car, boal, etc.)	(Property, car, bost, etc.)
* You are not required to report loans from commercial lending institutions, or any indebtedness created at of a retail installment or credit card transaction, made in the lender's regular course of business on term available to members of the public without regard to your official status. Personal loans and loans receive not in a lender's regular course of business must be disclosed as follows: NAME OF LENDER*	Commission or Rental Income, tist each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
* You are not required to report loans from commercial lending institutions, or any indebtedness created at of a retail installment or credit card transaction, made in the lender's regular course of business on term available to members of the public without regard to your official status. Personal loans and loans receive not in a lender's regular course of business must be disclosed as follows: NAME OF LENDER*		
* You are not required to report loans from commercial lending institutions, or any indebtedness created at of a retail installment or credit card transaction, made in the lender's regular course of business on term available to members of the public without regard to your official status. Personal loans and loans receive not in a lender's regular course of business must be disclosed as follows: NAME OF LENDER*	_	
* You are not required to report loans from commercial lending institutions, or any indebtedness created as of a retail installment or credit card transaction, made in the lender's regular course of business on term available to members of the public without regard to your official status. Personal loans and loans recent in a lender's regular course of business must be disclosed as follows: NAME OF LENDER' INTEREST RATE TERM (Months/Years) ADDRESS (Business Address Acceptable) SECURITY FOR LOAN BUSINESS ACTIVITY, IF ANY, OF LENDER None Real Property Sirved address City \$10,001 - \$10,000 OVER \$100,000	Other(Describe)	Other(Describe)
NAME OF LENDER* INTEREST RATE SECURITY FOR LOAN BUSINESS ACTIVITY, IF ANY, OF LENDER HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 \$10,001 - \$100,000 OVER \$100,000	* You are not required to report loans from commercial of a retail installment or credit card transaction, made available to members of the public without regard to	lending institutions, or any indebtedness created as pare in the lender's regular course of business on terms your official status. Personal loans and loans received
ADDRESS (Business Address Acceptable) SECURITY FOR LOAN BUSINESS ACTIVITY, IF ANY, OF LENDER Real Property Sireet address HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 \$10,001 - \$100,000 OVER \$100,000		
BUSINESS ACTIVITY, IF ANY, OF LENDER None		%
BUSINESS ACTIVITY, IF ANY, OF LENDER None Personal residence	ADDRESS (Business Address Acceptable)	
Real Property		_
#IGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000 OVER \$100,000	BUSINESS ACTIVITY, IF ANY, OF LENDER	
S500 - \$1,000 City \$1,001 - \$10,000 Guarantor OVER \$100,000 Other		Real Property
\$1,001 - \$10,000 Guarantor Other	HIGHEST BALANCE DURING REPORTING PERIOD	วทุ ซอน สนมาชออ
Guarantor	\$500 - \$1,000	City
□ \$10,001 - \$100,000 □ OVER \$100,000 □ Other	\$1,001 - \$10,000	☐ Guargetor
Uner	\$10,001 - \$100,000	
(Desaibel	OVER \$190,000	
	OVER \$100,000	
Comments:	OVER \$100,000	Other

SCHEDULE D Income – Gifts

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Paul Fong

➤ NAME OF SOURCE	NAME OF SOURCE	
Entertainment Software Association	Karen Bass, Speaker of the Assembly	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)	
576 7th St. NW, Ste. 300, Washington D.C. 20004	777 Figueroa St., Ste 4050, Los Angeles, CA 90017	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE	
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	
03 , 24 , 09 s 210.37 Reception	01,28,09 \$ 59.55 Dinner	
	01,08,09 s 11.95 Breakfast	
	01 / 08 / 09 s 72.52 Jacket	
► NAME OF SOURCE	NAME OF SOURCE	
Wine Institute	California Democratic Party	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)	
425 Market St., Ste. 1000, San Francisco, CA 94105	520 Capitol Mall, Ste. 260, Sacramento, CA 95814	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE	
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	
03 / 09 / 09 s 59.55 Reception	01 , 09 , 09 s 73.26 Dinner	
	01/, 08, 09 s 73.27 Dinner	
	\$	
► NAME OF SOURCE	➤ NAME OF SOURCE	
California Children's Hospital Association		
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)	
1215 K Street, Suite 1930, Sacramento, Ca 95814		
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE	
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	
03 , 03 , 09 s 52.82 Reception		
Comments:		
ognations,		

SCHEDULE D Income - Gifts

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name

Paul Fong

► NAME OF SOURCE	▶ NAME OF SOURCE
California Refuse Recycling Council - So. Calif	Consumer Attorneys of California
AOORESS (Business Address Acceptable)	AOORESS (Business Address Acceptable)
800 Wilshire Blvd., 15th Flr, Los Angeles, CA 90017	770 L Street, Sacramento, CA 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
OATE (mm/dd/yy) VALUE OESCRIPTION OF GIFT(S)	OATE (mm/dd/yy) VALUE OESCRIPTION OF GIFT(S)
05 , 19 , 09	04 , 28 , 09 s 34.24 Women Day Receptio
	04 , 27 , 09 \$ 34.24 Lobby Day Reception
	\$
► NAME OF SOURCE	► NAME OF SOURCE
California Refuse Recycling Council - Nor. Calif.	CBIA
AOORESS (Business Address Acceptable)	AOORESS (Business Address Acceptable)
1121 Street, Suite 505, Sacramento, CA 95814	1215 K Street, Suite 1200, Sacramento, CA 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
OATE (mm/dd/yy) VALUE OESCRIPTION OF GIFT(S)	OATE (mm/dd/yy) VALUE OESCRIPTION OF GIFT(S)
05 , 19 , 09 s 35.94 Trash Bash Reception	04 , 15 , 09 s 93.75 Dinner
	\$
	\$
► NAME OF SOURCE	► NAME OF SOURCE
California Travel and Tourism Commission	California Grocers Association
AOORESS (Business Address Acceptable)	AOORESS (Business Address Acceptable)
980 9th Street, Suite 480, Sacramento, CA 95814	1415 K Street, Suite 410, Sacramento, CA
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
OATE (mm/dd/yy) VALUE OESCRIPTION OF GIFT(S)	OATE (mmldd/yy) VALUE OESCRIPTION OF GIFT(S)
04 , 28 , 09 s 50.00 Reception	03 , 31 , 09 s 56.81 Reception
Comments:	

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Name				

Paul Fong

NAME OF SOURCE	▶ NAME OF SOURCE				
Black Eagle Wines	Cal Chamber				
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)				
1700 L Street, Sacramento, CA 95111	1215 K Street, Suite 1400, Sacramento, CA 95814				
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE				
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)				
11 , 24 , 09 s 65.00 Bottle of Wine	07 , 12 , 09 s 84.40 Dinner				
	\$				
NAME OF SOURCE	► NAME OF SOURCE				
California Tribal Business Alliance	Japanese Business Assoc of Southern California				
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)				
1530 J Street, Suite 250, Sacramento, CA 95181	1411 W 190th Street, Suite 270, Gardena, CA 90228				
BUSINESS ACTIVITY, IF ANY, OF SOURCE	OF SOURCE BUSINESS ACTIVITY, IF ANY, OF SOURCE				
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)				
08 , 26 , 09	06 / 24 / 09 s 57.81 Dinner				
01 , 14 , 09					
NAME OF SOURCE	► NAME OF SOURCE				
League of California Cities	Japanese Chamber of Commerce of Nor California				
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)				
1400 K Street, Sacramento, CA 95814	1875 South Grant St, Suite, San Mateo, CA 94402				
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE				
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)				
08 , 20 , 09 s 40.32 Reception	06,24,09 s 57.81 Dinner				
01 , 26 , 09 s 14.15 Reception					
Comments:					

SCHEDULE D Income - Gifts

Paul Fong

▶ NAME OF SOURCE		▶ NAME OF SOURCE	NAME OF SOURCE		
Various Healthcare/Life Sciences Entities Various Healthcare/Life Sciences Entities				ances Entities	
ADDRESS (Business Address Acce		ADDRESS (Business Address Acceptable)			
(AD11200 D-111111 111111	, p.021 0)			,,,	
BUSINESS ACTIVITY, IF ANY, OF SOURCE		BUSINESS ACTIVITY, IF ANY, OF SOURCE			
Healthcare and Life Sciences		Healthcare and Life Sciences			
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	
1 , 28 , 09 \$ 216.88	8* Reception/dinner	3 , 24 , 09	s_132.27**	Calif LifeSciences Day	
			\$	Event	
			\$		
► NAME OF SOURCE		► NAME OF SOURCE			
ADDRESS (Business Address Acce	еріа bie)	ADDRESS (Business Address Acceptable)			
BUSINESS ACTIVITY, IF ANY, OF	SOURCE	BUSINESS ACTIVIT	Y, IF ANY, OF SOL	JRCE .	
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	
\$			\$		
\$			\$		
			\$		
► NAME OF SOURCE	,	► NAME OF SOURCE	=	, , , , , , , , , , , , , , , , , , , ,	
ADDRESS (Business Address Acceptable) ADDRESS (Business Address Acceptable)			ole)		
BUSINESS ACTIVITY, IF ANY, OF	SOURCE	BUSINESS ACTIVIT	BUSINESS ACTIVITY, IF ANY, OF SOURCE		
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	
			\$		
			\$		
\$			\$		
Comments: * Sponsored b	by 13 entities, all of which paid by 14 entities, all of which paid	less than \$50 per per less than \$50 per pe	son for the ever	ent costs vent costs	